Kathiolan

The Danish Treatment of Scabies.

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Kathiolan.

The experiments made in the treatment of Scabies with Ungentum Hepatis Sulfuris (the ointment composed by Mr. Marcussen, Pharmaceutical Chemist, and brought into the market under the name of Kathiolan), prove this rapid method of treatment to be preferable to any other known method.

Svend Lomholt, M.D., in " Ugeskrift for Læger " (Weekly Journal for Doctors), 1912, No. 12, records his experiences made at the Army Hospital of Copenhagen, where the result of 678 treated cases showed the duration of the course of treatment to be 24 hours in 556 cases, 48 hours in 100 cases, 64 hours in 16 cases, and more than 64 hours in 6 cases. One application only was employed in each case.

Dr. Lomholt concludes by saying that this method complies with all the necessary requirements as regards reliability and rapidity of action.

Professor Ehlers, M.D., " Ugeskrift for Læger," 1921, No. 14, says: " In my department I have made similar experiments to Dr. Lomholt, only on a much larger scale. In the period 1918—1919, 1,430 cases were treated while in hospital, and 15,960 cases were subjected to ambulatory treatment."

Furthermore, Professor Ehlers says in " Ugeskrift for Læger," 1917, page 1,005: " Having now treated several thousand cases of Scabies, my experiences have established this method as being well adapted for ambulatory treatment. It is reliable in its action, and does not irritate the skin."

As for the treatment itself, M. Brun Pedersen, assistant physician, says, among other things, in his " Reports from the Dermatological Department of the Navy Hospital," published in

" Ugeskrift for Læger," 1917, No. 23: " During recent years the majority of the cases of Scabies occurring in Copenhagen have been subjected to ambulatory treatment at the " Kommunehospital " with the above named ointment—originally composed by Mr. Marcussen, Pharmaceutical Chemist,—the curative properties of which are presumably essentially due to the presence of large quantities of the higher sulphides of potassium. There is no doubt that this course of treatment is excellent and has been of great service in reducing to a minimum the number of Scabies cases admitted to hospital, relieving, in this way, the steadily increasing scarcity of hospital accommodation. At the present moment, however,—whatever the underlying cause may be,—the number of fresh cases of Scabies seems to increase from week to week, and for this reason I have thought it opportune to record the experiences made here, at the Navy Hospital, with regard to treatment with Unguent. hepat. sulfuris.

" The course of treatment, as it has been applied here, differs somewhat from the mode of procedure originally advanced by Professor Ehlers (" Ugeskrift for Læger," 1912, No. 35). Instead of rubbing in soap for twenty minutes and giving a bath of one-half to an hour's duration, the application of soft soap is made for ten minutes only, followed by a bath of twenty minutes, that is, one half-hour altogether, it being our impression that the long treatment with soap is unnecessary, and that the cure applied in this way involves far less local discomfort during the ensuing application of the ointment. The skin having been carefully dried, the inunction is now performed for ten minutes, not as originally advised, for twenty minutes; in most cases the ointment is applied by the people themselves under the supervision and with the assistance of a nurse; the ointment should be especially thoroughly applied to the hands and feet, to the articulations, and upon and around the genitals. After the application the patient is kept at the hospital for 24 hours, when he receives a final bath, and is discharged, his personal clothing having been disinfected in the meantime.

" Applied in this way, the cure has proved most satisfactory; in about 150 cases, there was no more than one relapse, and that occurred

in a case where it had been necessary, owing to special circumstances, to administer the final bath only eight hours after the application, not, as usual, twenty-four hours after.

" It has never been necessary to interrupt the treatment on account of soreness of the skin ; in a few cases, dabbing the inflamed areas with spiritus saponis cum pyroleo pini almost immediately caused the smarting to subside.

" Artificial dermatitis is, on the whole, perceptibly less pronounced than in any of the other treatments with preparations of sulphur. Among 100 cases there were four in whom a slight irritation was observed, and in which it was therefore expedient to apply, here and there, some simple ointment after the final bath, and further treatment proving unnecessary ; in six cases a more pronounced irritation was noted, which however only necessitated the patients staying in hospital for a few days, and it must be borne in mind that the cases in question were soldiers, who are admitted to hospital for far slighter lesions than in the case of civilians.

" The degree of intensity of the artificial dermatitis seems not to be primarily dependent on the severity of the Scabies eruption, but seems rather—as in the case of all artificial affections—to be mainly ascribable to a certain lowered power of resistance on the part of the individual ; considerable irritation may be seen subsequent to treatment in the case of a quite mild eruption of Scabies, and conversely, I have seen a very severe, secondarily infected case of Scabies, accompanied by Lymphangitis and marked Adenitis, subside in the course of twenty-four hours without the slightest irritation subsequent to treatment.

" Neither does irritation of the kidneys as a result of this treatment seem worth mentioning. Ehlers never found albuminuria following the cure, and, personally, I had the opportunity of treating a patient suffering from chronic nephritis in whom the albuminuria had for some time increased pari passu with the increasing severity of the Scabietic eruption, and in whom the amount of albumen in the urine actually diminished considerably immediately after the treatment, although this was carried out strictly as stated above.

" The general impression of this rapid course of treatment in its above stated modifications, is, briefly, that it is reliable, produces relatively slight local irritation, does not influence the general state of health, and has only one disadvantage, the smell of hydrogen sulphide attending it. Moreover, it is comparatively cheap (usually 250 gms. [about 8 ozs.] of ointment, will prove sufficient), and it is efficient for ambulatory treatment, and that not only at a hospital with a trained staff; personally, I have several times made patients apply the ointment in their homes with very favourable results, and it is my conviction that my colleagues will find it practicable, whenever circumstances make it desirable to treat their patients at home with entire success by this method, with some assistance from another member of the family for applying the ointment to the back. Finally, I shall just mention that,—as already stated by Dr. Lomholt at the March meeting of the Dermatological Society this year,—we possess in Unguent Hepat. Sulfuris an excellent remedy for pediculi pubis (one or two applications and a bath after twenty-four hours).

" It is my hope that this information may induce some of my colleagues to try treating Scabies at the patients' homes; we may perhaps then be able to avoid the calamity that patients, suffering from a contagious disease, should remain untreated for several weeks owing to lack of hospital accommodation, as has been the case lately at the ' Kommunehospital.' "

Furthermore, Dr. H. Stanley Banks, Senior Medical Officer of Health, Motherwell, N.B., in the " Medical Officer," November 5th, 1921, wrote as follows:—

" . . . . Since the publication of Dr. Svend Lomholt's paper on this subject in the ' Lancet,' December 18th, 1920 (' The Danish Method of Treating Scabies with Marcussen's Ointment,') I have been trying the method there advocated in its simplest form, and under conditions which form a very severe test of its efficacy. The method has, so far, succeeded far beyond my expectations. . . . . .

The treatment here has been carried out under the supervision of the health visitors in the house of the patients. Most of the

houses in which the patients were treated were small (one or two rooms), overcrowded and dirty; the people and the beds were also, in almost all cases, dirty, and in most cases there were impetiginous lesions in addition. The health visitor paid three or four visits on an average to each case, explained the method, arranged for the supply of ointment, instructed the people exactly what to do, and in a minority of cases actually applied the ointment. In most cases the ointment was applied by the people themselves, a spoon being used to spread it over the whole body. One application only was made as a routine measure. . . . . .

The preliminary and final baths were usually taken in a tub on the kitchen floor, as none of the houses involved possessed a bath. Care was taken to treat *every* member of the family affected, and the nurse kept in touch with the house until she was satisfied that the treatment had been carried out as thoroughly as was possible under the circumstances. *No disinfection* of the bed or personal clothing was undertaken, but a change of underclothing was recommended after the final bath. The treatment was usually carried out at night, and children put to bed and kept in bed the next day, although the latter instructions was discontinued in more recent months.

The results, under these adverse conditions, were as follows:— In the nine months ending 30th September, 1921, 62 individuals in 27 families were treated. Of these 61 were cured completely. There was no more than *one reinfection*, and that occurred in a house where the mother is of the absolutely hopeless type. In not more than six cases was a second application of the ointment considered to be required. The recipients of the treatment were highly delighted with it, as many of them had been infected for months. The fame of the ointment quickly spread from one treated person to others. Itchiness ceased immediately after the conclusion of the treatment.

One of my colleagues in general practice in this town has used the ointment in 20 cases, which were mostly of the type similar to those mentioned above, and so common in industrial districts. One

application was employed and no disinfection of clothing. He has had no recurrences in this series, and all have been quickly cured.

I have also employed this treatment in 11 cases admitted with infectious disease to the Burgh Hospital, Motherwell, and suffering also from Scabies. The ointment was here known to be applied strictly according to instructions, and disinfection of bed sheets was also done. One application in all cases resulted in complete cure.

In face of this experience. . . . . I consider that the Danish treatment is highly superior to the old methods, both for clean and dirty cases.

I consider that it is an easy, rapid and immediately effective method, when properly applied, and that for these reasons, it is a great advance on older methods even in cases where the people, houses, and beds are dirty."